

NAME OF PARTY OR ATTORNEY (and state bar number if attorney): ADDRESS WHERE YOU WANT MAIL SENT: TELEPHONE NUMBER (Optional): FAX NUMBER (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF: DEFENDANT:	
PROOF OF SERVICE BY MAIL (Harassment)	CASE NUMBER:

SERVICE BY MAIL

Instructions to Defendant: After having the plaintiff served by mail with any of the documents identified in item 1, have the person who mailed the documents complete this Proof of Service by Mail. Give the completed Proof of Service by Mail to the clerk for filing. You cannot serve these papers. An unsigned copy of the Proof of Service by Mail should be attached to and served with the document.

1. I served a copy of the following documents:

- a. ☐ completed *Response to Petition for Injunction Prohibiting Harassment*
- b. ☐ other (specify):

2. I deposited a true copy of each of the foregoing documents in the United States mail, in a sealed envelope with postage fully prepaid.

The envelope was addressed and mailed as follows:

- a. Name of person served:
- b. Address:

- c. Date of mailing:
- d. Place of mailing (city and state):

3. I am over the age of 18 and **not a party to this cause**. I am a resident of or employed in the county where the mailing occurred. My residence or business address is (specify): Telephone (specify):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE)